

POSITION	INIT.	DATE
CLASSIFIER	10	2-8-93
EXAMINER	313	2-9-93
TYPIST	335	2/10/93
VERIFIER	290	2-13-93
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		

# INDEX OF CLAIMS

Claim	Final	Original	Date
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			
27			
28			
29			
30			
31			
32			
33			
34			
35			
36			
37			
38			
39			
40			
41			
42			
43			
44			
45			
46			
47			
48			
49			

SYMBOLS  
 ✓ Rejected  
 = Allowed  
 - (Through numeral) Cancelled  
 + Restricted  
 X Non-selected  
 I Interference  
 A Appeal  
 O Objected

Claim	Final	Original	Date
51			
52			
53			
54			
55			
56			
57			
58			
59			
60			
61			
62			
63			
64			
65			
66			
67			
68			
69			
70			
71			
72			
73			
74			
75			
76			
77			
78			
79			
80			
81			
82			
83			
84			
85			
86			
87			
88			
89			
90			
91			
92			
93			
94			
95			
96			
97			
98			
99			
100			

UNDE  
17/934

L. NUMBER  
104 70

INTINGEN  
IFIED

M00

UNION  
REFILED

M00

n priority cla  
c 119 condit

nd and Acknt

E. CONA  
115 0  
15VAND

1176

RTS OF A  
ED SEPA

OTICE OF

8,

ount Due

1176

n PTO-436  
9:00